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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC US	E ONLY				
Prefix Serial					
DATE R	ECEIVED				

Name of Offering ( [ ] check if this is an amendment and name	has changed, and indicate change.)
Cosmetic Partners of America, LLC offering of up to \$125,000 in	limited liability company interests
Filing Under (Check box(es) that apply):  Type of Filing: [x] New Filing [] Amendment	[x]Rule 506 []Section 4(6) []ULOE
A. BASIC IDENTIFICATION	DATA
Enter the information requested about the issuer	
Name of Issuer ([ ] check if this is an amendment and name has Cosmetic Partners of America, LLC	as changed, and indicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
10501 Success Lane, Dayton, Ohio 45458	(937) 748-1514
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Company provides cosmetic skin treatment and hair removal pro	oducts and services PROCESSE MAR 03 2005

Type of Business Organiza	ation			
[ ]'corporation	[ ] limited partnership, alre	eady formed	[x] other (ple	ease specify):
[ ] business trust	[ ] limited partnership, to l	be formed	Limited Liabili	ty Company
		Month Yea	г	
Actual or Estimated Date of	of Incorporation or Organization:	[09][04]	[x] Actual	[ ] Estimated
Jurisdiction of Incorporatio	n or Organization: (Enter two-lette CN for Canada; FN			

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

### A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Appiy:	[x] Promoter [x] Benefic Owner	ial []	Executive Officer	[ ] Director [ x	] General and/or Managing Partner
Full Name (Last nam Imaging Resource C	ne first, if individual) enters, Ltd., an Ohio limite	d liability co	mpany		
	ce Address (Number and S e, Dayton, Ohio 45458	Street, City,	State, Zip Co	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Benefici Owner	al [x]	Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last nam Young, C. Edward	ne first, if individual)		14.24.2 · 14.44.1		
	ce Address (Number and S e, Dayton, Ohio 45458	Street, City,	State, Zip Co	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Benefici Owner	al [x]	Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Belche	r, Garth M.			
	ce Address (Number and S e, Dayton, Ohio 45458	Street, City,	State, Zip Co	de)	
Check Box(es) that Apply:	[x] Promoter [x] Benefi Owner	-	] Executive Officer	[ ] Director [	] General and/or Managing Partner
Full Name (Last nam	ne first, if individual) Americ	an Diagnos	stics, Inc., a Te	ennessee corpora	tion
Business or Residen 7003 Chadwick Drive	ce Address (Number and S e, Suite 321, Brentwood, Te	Street, City, ennessee 3	State, Zip Co 7027	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Benefic Owner		Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam	ne first, if individual)				
Business or Residen	ce Address (Number and S	Street, City,	State, Zip Co	de)	
Check Box(es) that Apply:	[ ] Promoter [ ] Benefic Owner	ial []	Executive Officer	[ ] Director [	General and/or Managing Partner
Full Name (Last nam	ne first, if individual)				· · · · · · · · · · · · · · · · · · ·

Busin	ess or Re	esidenc	e Addre	ss (Num	ber and	Street, (	City, Stat	e, Zip Co	ode)			
Check Apply:	Box(es)	that	[] Proi	moter [	] Benefic Owner	cial	[ ] Exe Offi		[][	irector	[ ] Gene Mana Partno	
Full N	ame (Las	st name	first, if	individua	al)					***************************************		
Busin	ess or Re	sidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			
	(Use	blank :	sheet, c	or copy	and use	additio	nal copi	es of thi	s sheet,	as nece	essary.)	
				B. IN	FORMA	TION AI	воит о	FFERIN	G			
	s the issu	er sold									S	Yes No
					in Appen	-		•				
2. Wh	at is the i	minimu	m inves	tment th	at will be	accepte	ed from a	any indivi	dual?			\$ <u>5,000</u>
3. Doe	es the off	ering pe	ermit joi	nt owner	ship of a	single u	unit?	•••••				Yes No
broker or dea dealer	ales of se r or deale aler. If mo r, you ma 	r regist re than y set fo	ered with five (5) orth the i	th the SE persons nformati	EC and/os to be list on for the	r with a ted are	state or : associat	states, lis ed perso	st the nar	ne of the		
Busine	ess or Re	sidenc	e Addre	ss (Num	ber and	Street, C	City, Stat	e, Zip Co	ode)			
Name	of Assoc	iated B	roker o	Dealer				<u>- 4, 11, 1 , 1 , 1 , 1 , 1 , 1 , 1 , 1 , </u>				
States	in Which	n Perso	n Listed	Has So	licited or	Intends	to Solici	t Purcha	sers		-	
(Chec	k "All S	tates"	or chec	k indivi	dual Sta	ıtes)				[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[iD]
[1L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (Las	t name	first, if i	ndividua	ıl)							
Busine	ess or Re	sidence	e Addre	ss (Num	ber and	Street, C	City, Stat	e, Zip Co	ode)			
Namo	of Assoc	iated P	roker or	· Dealer								

-										<del></del>		
States	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers											
(Chec	(Check "All States" or check individual States) [ ] All States								ates			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
- "	41		e. , .e.		13							
Full Na	ame (La	ist name	first, if i	ndividua	al) 							
Busine	ess or R	esidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	de)			
Name	of Asso	ciated E	Broker or	Dealer								
States	in Whic	ch Perso	n Listed	Has So	licited o	r Intends	to Solici	t Purcha	sers			
(Chec	k "All	States"	or chec	k indiv	idual St	ates)				[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[Al]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	(Use	e blank	sheet. c	r copy	and use	additio	nal copi	es of thi	s sheet.	as nece	ssarv.)	
	(	-	<b>-</b> , -						,		,	
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS											

<sup>1.</sup> Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>None</u>	\$ <u>-0-</u>
Equity	\$ <u>None</u>	\$
[ ] Common [ ] Preferred		
Convertible Securities (including warrants)	\$ <u>None</u>	\$ <u>-0-</u>
Partnership Interests	\$ <u>125,000</u>	\$ <u>15,000</u>
Other (Specify).	\$ <u>None</u>	\$
Total	\$ <u>125,000</u>	\$ <u>15,000</u>

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	2	\$ 15,000
Non-accredited Investors	0	\$ -0-
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Secur	ity Dollar Amount
Type of offering Rule 505	Type of Secur	1737
• • • • • • • • • • • • • • • • • • • •	• •	Sold
Rule 505	NA	Sold \$
Rule 505Regulation A	NA	\$ \$
Rule 505  Regulation A  Rule 504  Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	NA NA NA NA	Sold
Rule 505 Regulation A Rule 504 Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees Printing and Engraving Costs	NA NA NA NA	Sold
Rule 505 Regulation A Rule 504 Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees Printing and Engraving Costs Legal Fees	NA [	Sold
Rule 505 Regulation A Rule 504 Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	NA NA NA I I I I I I I I I I I I I I I I	Sold   S   S   S   S   S   S   S   S   S
Rule 505 Regulation A Rule 504 Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	NA NA NA I I I I I I I I I I I I I I I I	Sold
Rule 505 Regulation A Rule 504 Total  4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees	NA NA NA I I I I I I I I I I I I I I I I	Sold   S   S   S   S   S   S   S   S   S

Enter the difference between the aggregate offering price given in response to Question 1 and total expenses furnished in response to Part C - Question 4. is difference is the "adjusted gross proceeds to the issuer."		11,000
Indicate below the amount of the adjusted gross proceeds to the issuer used proposed to be used for each of the purposes shown. If the amount for any rpose is not known, furnish an estimate and check the box to the left of the limate. The total of the payments listed must equal the adjusted gross acceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[] \$	[] \$
Purchase of real estate	[] \$	[]
Purchase, rental or leasing and installation of machinery and equipment	[] \$	[] \$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer	[] \$	[]
pursuant to a merger)		
Repayment of indebtedness	[ x] <u>\$30,000</u>	[ x] <u>\$30,000</u>
Working capital	[] \$	[x] \$51,000
Other (specify):	[]	[]
· · · · · · · · · · · · · · · · · · ·		[]
Column Totals	\$ [] \$	. \$ [] .\$

[x]\$<u>111,000</u>

Total Payments Listed (column totals added) .....

### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Signature	Date
O Bluas Gowin	7.22·05
Title of Signer (Print of Type)	
Imaging Resource Centers, Ltd., Ma By: CEO	anager
	Title of Signer (Print of Type) Imaging Resource Centers, Ltd., Ma

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

## E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Cosmetic Partners of America, LLC	C. Glindynus	277.05
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Imaging Resource Centers, Ltd., Manager By: C. Edward Young	Imaging Resource Centers, Ltd., M By: CEO	anager